

**Amended Interim Designation of Agent to Receive Notification  
of Claimed Infringement**

**Full Legal Name of Service Provider:** Kansas State University

**Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):** KSU, K-State

**Address of Service Provider:** Kansas State University, Manhattan, KS 66506

**Name of Agent Designated to Receive**

**Notification of Claimed Infringement:** Jane D. Rowlett

**Full Address of Designated Agent to which Notification Should be Sent** (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):

Kansas State University

225 Anderson Hall, Manhattan KS 66506

**Telephone Number of Designated Agent:** 785-532-4392

**Facsimile Number of Designated Agent:** 785-532-5632

**Email Address of Designated Agent:** jrowlet@ksu.edu

Identify the Interim Designation to be Amended, by Service Provider Name and Filing Date, so that it may be Readily Located in the Directory Maintained by the Copyright Office: Kansas State University - Filing date: 11/30/98

**Signature of Officer or Representative of the Designating Service Provider:**

**Date:** 11/30/98

**Typed Printed Name and Title:** Jane D. Rowlett

Director of University Compliance

**Note: This Amended Interim Designation Must be Accompanied by a \$20 Filing Fee Made Payable to the Register of Copyrights.**

**RECEIVED**

**DEC 8 1998**

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